

NHTSA and FHWA, DOT

Pt. 1200, App. D

the funding reflected under the “Previous Balance”.

Current Balance—The net total of the “Previous Balance” and the “Increase/(Decrease)” amounts. The total of this column may not exceed the sum of the State’s current year obligation limitation and prior year funds carried forward.

**APPENDIX C TO PART 1200—ASSURANCES
FOR TEEN TRAFFIC SAFETY PROGRAM**

State: _____

Fiscal Year: _____

The State has elected to implement a Teen Traffic Safety Program—a statewide program to improve traffic safety for teen drivers—in accordance with 23 U.S.C. 402(m).

In my capacity as the Governor’s Representative for Highway Safety, I have verified that—

- The Teen Traffic Safety Program is a separately described Program Area in the Highway Safety Plan, including a specific description of the strategies and projects, and appears in HSP page number(s) _____.

- as required under 23 U.S.C. 402(m), the statewide efforts described in the pages identified above include peer-to-peer education and prevention strategies the State will use in schools and communities that are designed to—

- increase seat belt use;
- reduce speeding;
- reduce impaired and distracted driving;
- reduce underage drinking; and
- reduce other behaviors by teen drivers that lead to injuries and fatalities.

Signature Governor’s Representative for Highway Safety _____

Date _____

Printed name of Governor’s Representative for Highway Safety _____

APPENDIX D TO PART 1200—CERTIFICATIONS AND ASSURANCES FOR NATIONAL PRIORITY SAFETY PROGRAM GRANTS (23 U.S.C. 405)

State: _____

Fiscal Year: _____

Each fiscal year the State must sign these Certifications and Assurances that it complies with all requirements, including applicable Federal statutes and regulations that are in effect during the grant period.

In my capacity as the Governor’s Representative for Highway Safety, I:

- certify that, to the best of my personal knowledge, the information submitted to the National Highway Traffic Safety Administration in support of the State’s application for Section 405 grants below is accurate and complete.

- understand that incorrect, incomplete, or untimely information submitted in support of the State’s application may result in the denial of an award under Section 405.

- agree that, as condition of the grant, the State will use these grant funds in accordance with the specific requirements of Section 405(b), (c), (d), (e), (f) and (g), as applicable.

- agree that, as a condition of the grant, the State will comply with all applicable laws and regulations and financial and programmatic requirements for Federal grants.

Signature Governor’s Representative for Highway Safety _____

Date _____

Printed name of Governor’s Representative for Highway Safety _____

Instructions: Check the box for each part for which the State is applying for a grant, fill in relevant blanks, and identify the attachment number or page numbers where the requested information appears in the HSP. Attachments may be submitted electronically.